(2) Medical Relief.

103. Necessity for introducing a system of medical registration in the State with reference to both the allopathic and indigenous systems.

Mr. A. Rama Pie M. A., B. L. (Member, Municipal Council, Quilon) stated that, though his subject included both the allopathic and the indigenous systems of medicine, it was with special reference to Ayurveda that he proposed to speak. In allopathy, since the average level of the general education of those who took to its practice was fairly high, the chances of unqualified men being allowed to play with human lives were very rare, though instances were not wanting in which compounders and chemists and druggists played the rôle of doctors, resulting in avoidable loss of life. In Ayurveda, the state of affairs was far more serious. Persons without the slightest acquaintance with the medical science and without practical experience of any kind took to the healing art as their profession. The stock of their knowledge consisted of a few *slokas* committed to memory. They were exploiting the credulous public to their own advantage. Year after year the number of medical practitioners under the Ayurveda system was on the increase. They had no qualification of any kind and yet they were using poisons and poisonous drugs to the detriment of human life. He was not unaware of the difficulties that she locin the way of his suggestion being carried out. But the risk of allowing the Governmtate of affairs to continue was great. He, therefore, urged the desirability ce sides of ing a system of medical registration in the State.

Dewan's reply.—The subject of your discourse is a very import ghauts put u should not enic yourself anticipate a number of difficulties in legislating on the subje Educatio are doing departmentally all that is possible for ensuring efficiency and preventing ill-qualified people from practising the medical profession. Compounders employed in Government institutions are prohibited by departmental orders from prescribing or practising, and the breaches of these orders, if brought to the notice of the Darbar Physician and proved, will be visited with punishment.

In regard to the Ayurveda system, we insist upon our grant-in-aid Vaidyans being either people who have undergone a course of training in the Ayurveda College or being certified by the Director of Ayurveda as competent to practise. But there is the larger question remaining still unanswered. What about the multitude of practitioners who are not aided by Government? They are not amenable to Government control. It is a difficult question and a question which requires consideration. A serious objection to bringing them under legislative control is that we have not got a sufficient number of qualified men spread all over the country, and if we prohibit them now from practising, the public are likely to suffer. Legislation is the ultimate goal, but it must take time to reach that goal. The matter will be kept in view.

104. Insufficient supply of medicines to hospitals and the consequent hardships of the poor.

Mr. V. K. Kesava Pillai (Member, Minachil Taluk) expressed his gratification at the change for the better that had come over the administration of the Medical Department since the appointment of Dr. Lakshmanan as Darbar Physician. Still the old complaint remained, *viz.*, that the medicines supplied were not sufficient even for the requirements of six months. The fact had to be noted that, while the number of patients continued increasing year by year, the expenditure on account of the purchase of medicines was going down. For example, though the number of patients treated in all the medical institutions of the State in 1097 was 50,058 more than that of the year previous, the total expenditure on account of the purchase of medicines in 1097 was Rs. 54,503 less than that for 1096. The Member, therefore, requested that medicines might be supplied more liberally.

The Member also pointed out that, while the number of patients treated in the hospital at Lalam in 1097 was more than that treated at Kottayam in the same year, the number of medical officers at Lalam was only two, of whom one had to attend to the Poonjar Dispensary also, against four in the Kottayam Hospital.

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The Member, therefore, prayed that at least one Assistant and one compounder might be allowed to the Lalam hospital in addition to the existing staff.

With regard to the medical relief granted through the Ayurveda Department, the Member was of opinion that the maximum number of Vaidyasalas, fixed at 120 at the rate of one for four *pakuthies*, was inadequate and that there should be one Vaidyasala for every two *pakuthies*. The Minachil taluk had at present only one Vaidyasala, and even according to the principle laid down by the Government, *viz.*, 1 Vaidyasala for four *pakuthies*, the taluk was entitled to have two more Vaidyasalas. The Member also suggested the desirability of starting pharmaceutical works in the State so as to avoid expenditure on account of the purchase of foreign medicines.

Dewan's reply.—You complain of insufficient supply of medicines. Medicines are supplied on the indents of the medical officers themselves and the indents are based upon the attendance of patients in previous years. Some time ago, there was some difficulty in getting medicines in time. But since last year there has been no difficulty whatsoever in this respect, because, last year, the contract was given to a Travancorean who was very prompt in executing our orders. So I do not understand why there should be this complaint of insufficiency of medicines. Either the hospital staff must be misusing the medicines or the medical officers must be prescribing more than the required quantity. A year and a half ago, I visited the Haripad dispensary. A similar complaint was made to me. I wanted specific instances, but none were forthcoming. I brought the matter to the notice of the Darbar Physician. He has been taking care to see that proper supplies are made to the medical institutions of the State.

Member.—There is this complaint in all the hospitals.

Dewan.—I have not received such complaints. I have been making particular enquiries in my tours as to whether there has been dearth of medicines and from the replies I have been receiving I find that there is no such dearth now.

Member.—In 1097, there was an increase in the number treated.

Dewan.—They take the average for three years and allow a certain margin in fixing the quantity to be supplied. The fact that there has been a small increase in the number of out-patients cannot by itself be sufficient reason for the insufficiency of medicines.

In regard to the decrease of expenditure on medicines, the reason is that we have been taking greater care of late to enquire about the prices which are ruling in England and see that our medicines are obtained cheaper. Formerly, we used to send our order, and when the bill came, it used to be paid. Now, the Darbar Physician has been taking trouble to make enquiries and obtain quotations of prices beforehand, with the result that we do not pay so much for our medicines now as before. Further, medicines were very costly during the war period, but prices are now going down. Attempts are also being made to substitute indigenous drugs in the place of drugs obtained from foreign countries. For instance, santonine is a very costly drug, and steps are being taken to substitute for it a local drug, which has the same virtue. It is in these ways that the cost is reduced.

Then you say that the staff in the Minachil hospital is insufficient. The average attendance is only moderate. I do not see why that could not be managed by a man of the rank of an Assistant Surgeon or a Deputy Surgeon, assisted by a Sub-Assistant Surgeon and one or two compounders. I do not think that the staff is insufficient. The Di

ken up ar d to Ayurveda Vaidyasalas, you want one for every two *pakuthies*. 120 Gover ber to be reached for the present. But it does not mean that we sho mad to that number. You must also remember what Mr. Rama Pie said of C nsider we should not encourage Vaidyasalas which are started by unquali- fie The u cannot expect qualified men to be turned out in such large numbers rate of te sudden increase in the number of grant-in-aid Vaidyasalas. tl hlocation of ey

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